

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 577

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PricewaterhouseCoopers Political Action Committee I

A. Full Name (Last, First, Middle Initial) Edward Alan Gold		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7	
Mailing Address PricewaterhouseCoopers LLP 1900 K Street NW, Suite 900		Transaction ID: 19706838	
City Washington State DC Zip Code 20006	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer PricewaterhouseCoopers, LLP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Partner Aggregate Year-to-Date ▼ 250.00		
B. Full Name (Last, First, Middle Initial) Sharon L Kane		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7	
Mailing Address PricewaterhouseCoopers LLP 300 Atlantic Street		Transaction ID: 19706839	
City Stamford State CT Zip Code 06901	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer PricewaterhouseCoopers, LLP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Partner Aggregate Year-to-Date ▼ 250.00		
C. Full Name (Last, First, Middle Initial) Scott William Davis		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7	
Mailing Address PricewaterhouseCoopers LLP 300 Atlantic Street		Transaction ID: 19706840	
City Stamford State CT Zip Code 06901	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer PricewaterhouseCoopers, LLP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Partner Aggregate Year-to-Date ▼ 250.00		
SUBTOTAL of Receipts This Page (optional)		750.00	
TOTAL This Period (last page this line number only)			